



PTO/SB/21 (09-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number

10/054,611

700 52,62

Filing Date

January 18, 2002

First Named Inventor

Cech, Thomas

Art Unit

1652

Examiner Name

Malgorzata Walicka

Attorney Docket Number

015389-002970US

**ENCLOSURES (Check all that apply)**

Fee Transmittal Form (1 pg)



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a  
Provisional ApplicationPower of Attorney, Revocation  
Change of Correspondence Address

Terminal Disclaimer



Request for Refund



CD, Number of CD(s) \_\_\_\_\_



Landscape Table on CD



After Allowance Communication to TC

Appeal Communication to Board  
of Appeals and InterferencesAppeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify  
below):

Return Postcard

Request for Certificate of Correction

under § 1.323 (2 pgs)

Certification of Correction Form (1 pg)

Certified Copy of Priority  
Document(s)Reply to Missing Parts/ Incomplete  
ApplicationReply to Missing Parts  
under 37 CFR 1.52 or 1.53

Remarks

The Commissioner is authorized to charge any additional fees to Deposit  
Account 20-1430.

Certificate

MAY 10 2006

of Correction

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

Townsend and Townsend and Crew LLP

Signature

Printed name

Randolph Ted Apple

Date

5/3/06

Reg. No.

36,429

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

Typed or printed name

Anthony J. Marshall

Date

5/3/06

MAY 10 2006



Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2006**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ ) 100**Complete if Known**

Application Number	10/054,611
Filing Date	January 18, 2002
First Named Inventor	Cech, Thomas
Examiner Name	Malgorzata Walicka
Art Unit	1652
Attorney Docket No.	015389-002970US

**METHOD OF PAYMENT** (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION** (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	Fee (\$)	Fee Paid (\$)
Each claim over 20 (including Reissues)	50	25	
Each independent claim over 3 (including Reissues)	200	100	
Multiple dependent claims	360	180	
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____ -20 or HP = _____ x _____ = _____			

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ -3 or HP = _____ x _____ = _____			

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	_____	_____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Certificate of Correction pursuant to 37 CFR § 1.20(a)**Fees Paid (\$)**100**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	36,429	Telephone	650-326-2400
Name (Print/Type)	Randolph Ted Apple			Date	5/3/06

MAY 10 2006



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Certification of Correction Branch  
Commissioner for Patents,  
P.O. Box 1450  
Alexandria, VA 22313-1450

on 5/3/06

TOWNSEND and TOWNSEND and CREW LLP

By [Signature]  
Anthony J. Marshall

PATENT  
Attorney Docket No.: 015389-002970US

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Cech, Thomas, et al.

Patent No.: 7,005,262

Application No.: 10/054,611

Issued: February 28, 2006

For: METHODS FOR DETECTING  
NUCLEIC ACIDS ENCODING HUMAN  
TELOMERASE REVERSE  
TRANSCRIPTASE

Confirmation Number: 9312

Examiner: Malgorzata Walicka

Technology Center/Art Unit: 1652

REQUEST FOR CERTIFICATE OF  
CORRECTION UNDER §1.323

Certification of Correction Branch  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

05/09/2006 BABRAHA1 00000064 201430 7005262  
01 FC:1811 100.00 DA

Sir:

Pursuant to 37 CFR §1.323 Applicant submits a Certificate of Correction for the above-identified Patent. The Certificate adds language regarding Government Support that was inadvertently omitted from the specification during prosecution. Because the correction merely adds the funding information, it does not constitute new matter or raise issues requiring reexamination. The desired correction is set forth on form PTO/SB/44, enclosed.

MAY 10 2006

Please deduct the fee, pursuant to 37 CFR §1.20(a), of \$100.00 from deposit account 20-1430 and any additional fees associated with this Certificate.

Respectfully submitted,



Randolph Ted Apple  
Reg. No. 36,429

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rev. 1/04  
60726069 v1

**UNITED STATES PATENT AND TRADEMARK OFFICE  
CERTIFICATE OF CORRECTION**Page 1 of 1

PATENT NO. : 7,005,262  
APPLICATION NO.: 10/054,611  
ISSUE DATE : February 28, 2006  
INVENTOR(S) : Cech, Thomas, et al.

It is certified that an error appears or errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Column 1, line 15 please add:

--This invention was made with Government support under Grant No. GM28039, awarded by the National Institutes of Health. The Government has certain rights in this invention.-- after "abandoned".

MAILING ADDRESS OF SENDER (Please do not use customer number below):

TOWNSEND AND TOWNSEND AND CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, CA 94111-3834

60726070 v1